

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	PAB 2nd	10976 67773	11-28-00 2-8-01 3/8/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	7/10
Original	2/30
1	2/02
2	✓
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9	✓
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41	
42	✓
43	✓
44	✓
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49	✓
50	✓

Claim	Date
Final	10
Original	32
1	02
51	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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